UNITED TATES PATENT & TRADEMAK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 14/2,1995 2 Serial/Patent # 08/05/6 48/6					
3 Please refund the following fee(s):		4 PAP NUM	ER BER	5 DATE FILED	6 AMOUNT
	Filing				\$
	Amendment				\$
*	Extension of Time	#	13	5-26	\$ 110,00
V	Notice of Appeal/Appeal			·	\$
	Petition				\$
	Issue				\$.
	Cert of Correction/Terminal Disc.				\$
	Maintenance				\$
	Assignment				\$
	Other				\$
		7 TOTAL AMOUNT \$ //0.00			\$ /10.00
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
	Overpayment	V	С	redit Dep	osit A/C #:
X	Duplicate Payment		9	13a	725
	No Fee Due (Explanation):				
·					
11 REFUND REQUESTED BY: MCLY XXXIII					
TYPED/PRINTED NAME: JOCALO GANGO TITLE: MANUAL					
SIGNATURE: COQUELME SANJOSO PHONE: 305-78/2					
office:					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED: Meda Connelly DATE: 7/12/95					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B